

NEBRASKA STATE FIRE MARSHAL OFFICIAL INTERPRETATION



Interpretation Number: 03-04

Date: 1 February 2007

Pamphlet Number: NFPA 101, 2000 ed.; NFPA 72, 2002 ed.

Section(s): 9.6.3, 7.4.3

Comments:

This interpretation applies to patient care areas of new and existing Health Care Occupancies. It is consistent with an opinion from CMS.

Question: Are fire alarm notification devices required to notify patients of an alarm in Health Care Occupancies?

Response: No.

The code allows patient notification of fire alarm activation to be conducted by the facility staff. To accomplish this, audible or visual alarm requirements as specified below must be met to notify staff members of an alarm condition.

Audible devices are permitted to meet Private Mode sound level requirements in any area occupied by patients or staff, including patient rooms. The sound level in Private Mode must be at least 60 dB (decibels). The audible signal can consist of any sound that is recognized by the staff. This can include horns, bells, chimes, tones or the public address system (PA) when the control center for the PA is attended 24 hours a day. The audible signal must be consistent throughout the building.

Visual alarm devices are permitted in lieu of audible notification devices in:

1. Operating rooms.
2. Critical care areas where medical equipment with alarm signals are used.
3. Existing patient rooms have previously approved visual alarm devices.

Lower (Private Mode) sound levels are permitted in patient areas only. Higher (Public Mode) sound levels are required when the AHJ determines it is necessary. This can include cafeterias, lobbies or similar spaces.

Signature: *John E. Falgione*

Date: 02/01/07

Title: John E. Falgione, State of Nebraska Fire Marshal